BEST AVAILABLE COPY

Effective November 10, 1998														
CLAIMS AS FILED - PART I (Column 1) (Column 2)								_		ENTITY	OR	OTHER		
FC	OR		NUMBI	ER FILED		NUMBER		ſ	RATE	FEE]	RATE	FEE	
BA	ASIC FEE		3 3 5	AND SHAPE SHAPE	. 7 <u>. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7.</u>			Ī		380.00	OR		760.00	
TC	OTAL CLAIMS		2	minus	20=	* ~			X\$ 9=		OR	X\$18=	21L)	
	DEPENDENT CI		minus 3 =			* ~			X39=	1	OR	X78=	1120	
MU	JLTIPLE DEPEN	NDENT	CLAIM PI	RESENT] [+130=		OR		,,,_	
* If	the difference	in colu	ımn 1 is	less than z	ero, (enter "0" in	column 2	L	TOTAL	+	OR		WX.	
	С	:LAIM	S AS A	MENDE	D - F	'ART II			OTHER THAN					
L			umn 1)			Column 2)	(Column 3)	· ·	SMALL		OR	SMALL	/	
AMENDMENT A		REM. AF	AIMS IAINING FTER NDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI/ TIONAL PEE	
NDN	Total	*	<u>}</u>	Minus	**	35	=		X\$ 9=		OR	X\$18=	Y	
AME	Independent	*)	H 25 M	Minus	###	$\frac{1}{2}$	1=		X39=		OR	X78=		
	FIRST PRESE	MAIL)N OF MIC	JLTIPLE DEI	PENL	ENT CLAIM			+130=		OR	260=		
								L	TOTAL DDIT. FEE		┨ _{╱╏} ┖	TOTAL ADDIT, FEE		
			umn 1)			Column 2)	(Column 3)	·)U(1. 1 <u></u>			ADDII. 1 ====		
AENT B		REM/ AF AMEN	AIMS IAINING FTER NDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI-1 TIONAL FEE	
AENDMENT	Total	* a	3/	Minus	**	35	=		X\$ 9=		OR	X\$18=		
AME	Independent FIRST PRESE	 * /	10	Minus ULTIPLE DEF	PEND	10	=		X39=		OR	X78=		
	Titotti	171111	IV Or all	/LIII		/EIVI O.L			+130=		OR	+260=		
							,	AD	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
			umn 1)			Column 2)	(Column 3)							
MENT C		REMA AF	AIMS AINING TER IDMENT		PR	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ᇎ	Total			Minus	**		=	· [:	X\$ 9=		OR	X\$18=		
AME	Independent	*		Minus	***		=		X39=		OR	X78=		
	FIRST PRESE	NTATIO	N OF MU	ILTIPLE DEF	'END	ENT CLAIM						i		
+ H	f the entry in colum	mn 1 is if	යෙන ගියා යි.	a antry in colu	ımn 2,	write "0" in ∞	lumn 3.	<u> </u>	+130= TOTAL		OR	+260=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE												TOTAL ADDIT. FEE		
T	The "Highest Num	ber Prev	iously Paid	I For (Total or	Inder	endent) is the	highest number	r found	in the app	ropriate box	, in colu	umn 1.		

Application or Docket Number